

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: MICHALENES (410411)

Address: 530 N UNION ST, RIPON, WI 54971

License Status: REGULAR

Licensed/Certified/Registered 05/01/1996

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0093639 **End Date:** 11/01/2004 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007045 Served 11/23/2004

Deficiencies Cited

83.21(4)(p)

83.21(4)(w)

Subject Area

PROMPT AND ADEQUATE TREATMENT

SAFE ENVIRONMENT

Compliance
Verified

Corrected

Survey ID: 0093440 **End Date:** 09/22/2004 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Survey ID: 0093245 End Date: 08/17/2004 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007014 Served 09/07/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(t)	INCOMPETENCY		
83.41(10)(a)	BUILDING MAINTENANCE		
83.41(5)(a)5	BATHROOMS SHALL BE CLEAN		
83.41(9)	CLEANLINESS OF ROOMS		
83.65(6)(b)	SMOKE BARRIER		

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Enforcement History

Date: 11/19/2004 **SOD #10007045** **Appealed: Yes** **Decision: STIPULATION**

Sanctions

FORFEITURE---83.21(4)(p)

FORFEITURE---83.21(4)(w)

Date: 09/07/2004 **SOD #10007014** **Appealed: Yes** **Decision: STIPULATION**

Sanctions

SUBMIT POC (SOD APPEAL ONLY)

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Provider Inspection Summary

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Complaint History

Date Complaint Received: 10/21/2004

Date Investigation Completed: 11/01/2004

Subject Area(s)

RESIDENT RIGHTS

Result

SUBSTANTIATED

SOD #

11/19/04

Date Complaint Received: 08/31/2004

Date Investigation Completed: 09/22/2004

Subject Area(s)

RESIDENT RIGHTS

PHYSICAL PLANTS & SAFETY HAZARDS

PROGRAM SERVICES

Result

NOT SUBSTANTIATED

NOT SUBSTANTIATED

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 08/02/2004

Date Investigation Completed: 08/17/2004

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE

ADMINISTRATION

Result

NOT SUBSTANTIATED

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 07/22/2004

Date Investigation Completed: 08/17/2004

Subject Area(s)

PROGRAM SERVICES

Result

NOT SUBSTANTIATED

SOD #

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